

14-03-2020

To the Chief Medical Officer Scotland

Dear Dr Calderwood,

We herewith write to show our concerns about the steps taken by the UK government regarding the SARS-CoV-2outbreak. Although we understand the rationale behind the proposed actions, we are concerned several important issues have not been sufficiently considered:

The current actions intend to slow down the speed of the UK epidemic with approx. 20%. Although currently our health care system is working really well to ensure care is provided where needed, we are concerned that, like in Italy, our healthcare system still might become overwhelmed towards the peak of the epidemic. Italy has twice the ICU capacity per 10.000 inhabitants compared to the UK, and do see major problems with providing sufficient care for the most ill patient groups.

The UK advise is intended to generate <u>herd immunity</u> relatively quick; importantly, there is no evidence this will happen as anticipated by the government, since it is still unclear whether a current Covid19 infection prevents re-infection with the same virus in the near future, even re-infection with a variant strain in the short run, the latter being already reported in China.

Therefore, given major progress in vaccine development has been made, it seems more rational to prevent infections until a vaccine might be available (earliest coming summer). Alternatively, the current approach, it is fairly certain a large number of individuals will suffer severe disease and even die.

<u>WHO</u> advises to continue containment alongside mitigation actions, meaning testing and tracing infected individuals also in the community. Furthermore, they advise stringent actions for social distancing, to dramatically slow down the spread of the virus in the community. The current limited actions regarding social distancing in the UK allows more rapid spread of the virus compared to our surrounding countries, and meanwhile information regarding true numbers of individuals affected will be lacking by absence of community testing, preventing anticipation of care and potential measures that need to be taken downstream.

More stringent actions have <u>proven</u> to be <u>effective</u>: countries including Hong Kong and South Korea have shown to be able to contain the virus with the proposed stringent but socially acceptable actions, including stringent social distancing, continuous case and contact tracing, and self-isolation.

We therefore call upon the Scottish government to take more stringent actions now.

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This advice concerns <u>social distancing</u>, <u>calling upon the community</u> to limit use of public transportation, and limit social interaction including meetings with smaller groups of people, like they have implemented in neighbouring countries.

Furthermore, we would strongly advise to put more emphasis to <u>protect the vulnerable population</u>, and therefore ask the chronically ill and elderly population to elicit more stringent social distancing, including working from work, avoiding social gatherings, avoiding direct interaction with young children, and call upon the community to help with delivery of groceries and other necessities.

Finally, we would like to advise continuation of community <u>testing</u>, and further tracing and isolation of positive cases in the community to help slow down the epidemic and to support future decisions. Certainly, <u>for the Scottish situation</u>, this still seems faesible, given the limited number of cases, which so far have remained mostly traceable to other cases or Italy.

We furthermore would like to underline the request of other scientists in the country to make the models the current policy is based publicly available to ensure we understand the decisions taken and the path forward.

Sincerely,



**Debby Bogaert** 

Professor of Paediatric Infectious Diseases, University of Edinburgh Honorary consultant Paediatric Infectious Diseases, Royal Hospital for Sick Children

Also on behalf of,

Devi Sridhar Professor of Global Public Health, University of Edinburgh Head of the Global Health Governance Programme, University of Edinburgh

Jurgen Haas Professor of Viral Genomics, University of Edinburgh Head of Infection Medicine, University of Edinburgh